

# In the Court of Appeals of the State of Alaska

**Kao Ching Saelee,**  
Appellant,

v.

**State of Alaska,**  
Appellee.

Court of Appeals No. **A-12994**

## **Notice of Intent to Enter Judgment For Cost of Appointed Attorney**

Date of Notice: **8/11/2021**

Trial Court Case No. **3AN-12-09106CI**

Unless you or the prosecutor objects by **9/27/2021** (you may use the enclosed form to file an objection), the court or clerk will enter a judgment against you for the cost of your appointed attorney as indicated below:

Type of Appellate Proceeding	Misdemeanor	Felony
Merit Appeal or Appeal from Post-Conviction Relief Proceedings	750	\$ 1,500

Entered under Appellate Rule 209(b)(6).

Clerk of the Appellate Courts

  
Julie Kentch, Deputy Clerk

cc: Kao Ching Saelee at Goose Creek Correctional Center

Distribution:

Email:  
Cella, Rachel E., Public Defender  
Wendlandt, Diane L.

# In the Court of Appeals of the State of Alaska

**Kao Ching Saelee,**

Appellant,

v.

**State of Alaska,**

Appellee.

Court of Appeals No. **A-12994**

## **Opposition to Entry of Judgment For Cost of Appointed Attorney**

Date of Notice: **8/11/2021**

Trial Court Case No. 3AN-12-09106CI, 3AN-05-04223CR

I oppose the entry of the proposed judgment against me for the cost of appointed attorney for the following reason(s):

- ☐ My conviction was reversed on appeal.
- ☐ I filed the following type of action, but the clerk or court assessed the wrong amount for this action:
  - ☐ Sentence Appeal
    - ☐ Combined Merit Appeal and Petition for Sentence Review
    - ☐ Petition for Sentence Review
    - ☐ Petition for Hearing
    - ☐ Merit Appeal
    - ☐ Petition for Review
    - ☐ Appeal from Post-Conviction Relief Proceeding
    - ☐ Original Application
    - ☐ Combined Merit and Sentence Appeal
- ☐ The clerk or court is proposing to enter more than one judgment against me. This is not correct because all of my offenses were resolved in one court proceeding.
- ☐ I should be assessed less than the scheduled amount because my attorney spent only \_\_\_\_ hours on my case. (If you check this box, you must attach a statement from your attorney showing the hours spent on your case.)
- ☐ Other \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Appellant/Petitioner's Daytime Phone

Appellant/Petitioner's Signature

---

Appellant/Petitioner's Mailing Address	City	State	Zip
--	------	-------	-----

Mailed to State's Attorney on:\_\_\_\_\_ (Date)